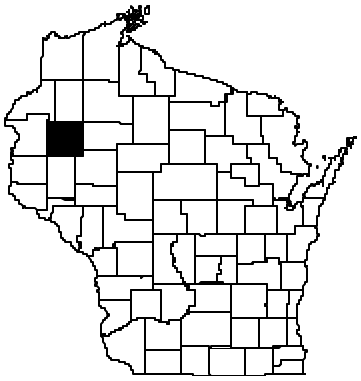
The 2000 Burden of Diabetes in

Barron County

American Diabetes Association.
Cure • Care • Commitment™

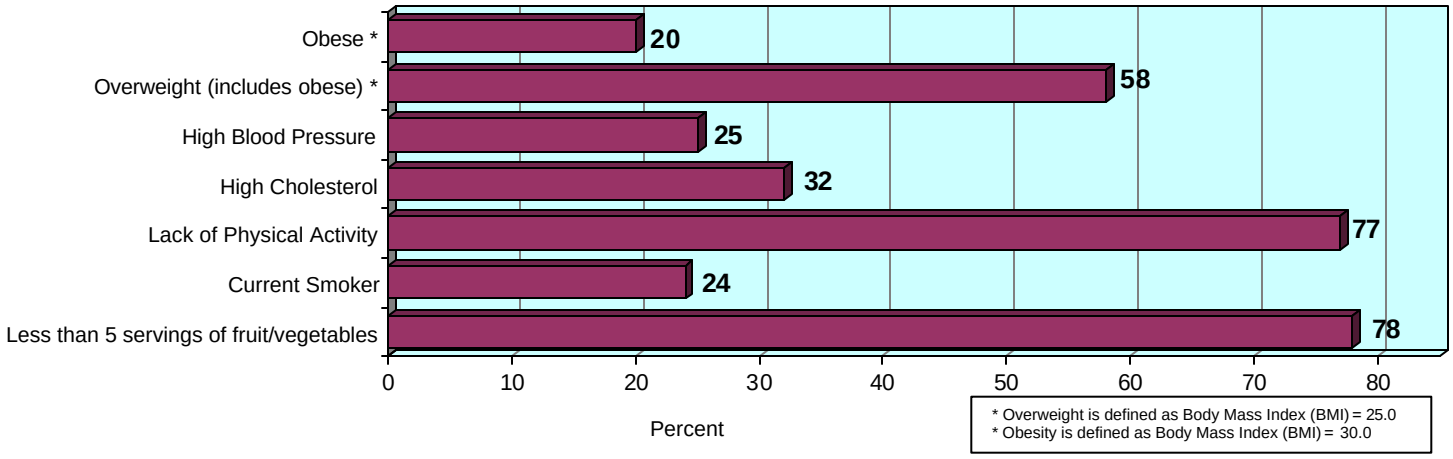


	Diabetes Prevalence - Barron County			
Age category	*Population*	*Estimated Number Diagnosed (%)*	*Estimated Number Undiagnosed (%)*	*Total number (%)*
♦ Ages 18 – 44	15,670	230 (1%)	120 (1%)	350 (2%)
♦ Ages 45 – 64	10,540	470 (4%)	240 (2%)	710 (7%)
♦ Ages 65 +	7,370	1,010 (14%)	530 (7%)	1,540 (21%)
♦ All ages adult	33,580	1,710 (5%)	890 (3%)	2,600 (8%)

Total percent may not equal the sum of diagnosed percent and undiagnosed percent, due to rounding.

	2000 Hospitalizations - Barron County			
	Total Number	*Number Diabetes-related (% of total)*	*Total Charges*	*Diabetes-related Charges (% of total charges)*
All ages	5,510	750 (14%)	$36,243,000	$ 5,646,000 (16%)

Percent of Wisconsin Adults with Risk Factors Related to Diabetes



OTHER INFORMATION

- There are two main types of diabetes, Type 1 and Type 2. Type 1 develops most often in children and young adults, although it may appear at any age. A person with Type 1 diabetes needs to take insulin because their body makes little or no insulin on its own. In Type 2 diabetes, some insulin is produced but it either is not enough or it doesn't work as it should. People with Type 2 diabetes may or may not need to take insulin. They may be able to control their blood glucose with a combination of proper diet, exercise, and possibly medication. A person with Type 1 or Type 2 diabetes is at an increased risk of numerous complications, including blindness, kidney disease, foot and leg amputations, and heart disease.
- The Diabetes Prevention Program results (August 2001) found that participants randomly assigned to intensive lifestyle intervention (30 minutes of physical activity a day and diet improvement) reduced their risk of developing Type 2 diabetes by 58%. For more information: http://www.cdc.gov/diabetes/news/docs/dpp.htm
- The cost of diabetes in Barron County is staggering. In 1998 for Barron County, the direct costs were estimated at $10.1 million, indirect costs were estimated at $12.3 million, totaling an estimated $22.4 million.
- The Wisconsin diabetes death rate for the period 1993 to 2000 has remained stable at 20/100,000.

Control of Type 1 and Type 2 Diabetes

If you have diabetes, the best way to prevent complications is to control your diabetes effectively. For more information: http://www.dhfs.state.wi.us/health/diabetes/Cons_resources.htm.

- Blood Sugars:
  - ➔ Recommendation 1: Check your blood sugar regularly, according to your health care provider's instructions. Aim for a fasting blood sugar level of 80-120 mg/dl and for a bedtime blood sugar level of 100-140 mg/dl.
  - ➔ Recommendation 2: Get a "Hemoglobin A1c" test every 3-6 months (goal – less than 7%); this tells your health care provider what your overall level of blood sugar control has been for the past 2-3 months.
- Heart (Cardiovascular) Health:
  - ➔ Recommendation 1: Get your cholesterol checked every year. Aim for a good cholesterol (HDL) level of greater than 45 mg/dl, a bad cholesterol (LDL) level of less than 100 mg/dl, and triglycerides less than 200 mg/dl.
  - ➔ Recommendation 2: Have your blood pressure measured every time you see your health care provider. It is best for your blood pressure to be less than 130/80 mmHg.
  - ➔ Recommendation 3: If you smoke, quit. ***For assistance, call the free Wisconsin Tobacco Quit Line at 1-877-270-7867.*** Also, reduce your exposure to other people's smoke.
- Eye Care:
  - ➔ Recommendation: Have a dilated eye exam once a year. (Dilated exams use eye drops.)
- Foot Care:
  - ➔ Recommendation 1: Remove your socks and shoes every time you see your health care provider, so he or she can look at your bare feet to examine them. Also, do a daily self-examination at home.
  - ➔ Recommendation 2: Ask your health care provider to do a special foot risk test, with a tool called a monofilament once a year.

Prevention of Type 2 Diabetes

The best way to prevent Type 2 diabetes is to reduce or prevent risk factors that can be changed, including:

- Weight:
  - ➔ Recommendation: Maintain a healthy body weight by eating a healthy, low-fat, high-fiber diet that includes 5 servings of fruits and vegetables per day, and increase physical activity.
- Physical Inactivity (Lack of Exercise):
  - ➔ Recommendation: Incorporate a total of at least 30 minutes of accumulated moderate physical activity (for example, walking, housework, or gardening) on most days. More vigorous activities (swimming and biking) will provide more benefits.
- Heart (Cardiovascular) Health:
  - ➔ Recommendation 1: Have your blood pressure measured every two years. An optimal blood pressure is 120/80 mmHg or lower.
  - ➔ Recommendation 2: Have your cholesterol level measured every 5 years; aim for a HDL (good cholesterol) level of at least 40 mg/dl, a LDL (bad cholesterol) level of less than 100 mg/dl, and a triglyceride level of less than 150 mg/dl.

What a Community Can Do to Reduce Risk of Diabetes

- ❖ Ask restaurants, school lunch programs, vending companies, and work cafeterias to offer healthy food choices. Work with grocery stores and markets to increase fruit and vegetable consumption.
- ❖ Promote programs to expand community physical activity opportunities (for example, the construction of new biking/walking paths or opening school gyms and pools for community use).
- ❖ Encourage all persons to know the risk factors for developing diabetes.
- ❖ Join and encourage others to take part in diabetes awareness and community events.

TECHNICAL NOTES: Prevalence is the number of cases of a disease that are present in a population at a specified time. Diagnosed prevalence: 1997-2000 WI Behavioral Risk Factor Survey (BRFS), 1994-1997 U.S. Behavioral Risk Factor Surveillance System (BRFSS), Great Lakes Inter-Tribal Council, Inc., and 2000 U.S. Census. Undiagnosed prevalence: Centers for Disease Control and Prevention (CDC) estimate. Total prevalence: diagnosed + undiagnosed estimates. Hospitalization data: WI Division of Health Care Financing, Bureau of Health Information (DHCF-BHI) inpatient hospital discharge database. Risk factors: 2000 WI BRFS, except for high blood pressure and high cholesterol (1999 BRFS). BMI is defined as weight in kilograms divided by height in meters squared (kg/m^2). Lack of physical activity indicates not getting at least 30 minutes of moderate physical activity most days of the week. Cost information is from the American Diabetes Association, Economic consequences of diabetes mellitus in the U.S. in 1997. *Diabetes Care* 1998 Feb; 21(2):296-309. Direct costs are defined as medical expenditures attributable to diabetes. Indirect costs are defined as those related to foregone earnings due to disability and mortality attributable to diabetes. Mortality data: DHCF-BHI. "Control of Type 1 and Type 2 Diabetes:" Wisconsin Essential Diabetes Mellitus Care Guidelines, 2001. "Prevention of Type 2 Diabetes:" American Heart Association, the National Heart, Lung, and Blood Institute, and the Wisconsin Essential Diabetes Mellitus Care Guidelines. Data compiled by the Diabetes Control Program, Wisconsin Division of Public Health, February 2002. Please see Detailed Technical Notes for more information.